

October 25, 1991

Environmental Protection Agency Region IX, Permits Branch 75 Hawthorne Street San Francisco, CA 94105

To Whom This May Concern:

REFERENCE: Letter dated June 10, 1993, referring to ProSil Wafer Corporation operating at 3010 and 3030 Olcott St. Santa Clara, CA. 95054, under Generator Identification #CAT 080 032 188.

On October 1, 1993, a "Asset Purchase Agreement" was signed by UniSil Corporation and ProSil Wafer Corporation for the purchase of Prosil Wafer Corporation's operations by UniSil Corporation.

This agreement is contingent upon Prosil restarting manufacturing operations and entering into a production phase in November 1993 and continuing through the date that the transfer of ownership takes place. The transfer of ownership of ProSil Wafer Corporation to UniSil Corporation is to take place on or before December 15, 1993.

All operations will be the same as before the June 11, 1993 shutdown of production of ProSil Wafer Corporation. There will be no changes in the mode of operations or in the hazardous chemicals used in the manufacturing operation.

On or before December 15, 1993, you will receive the required information for the change in ownership, related to permit(s) that have been granted to ProSil Wafer Corporation by your agency.

The Santa Clara Fire Department, Hazardous Materials section has been contacted and has approved the reinstituting of manufacturing operation under the direction of the present ownership of ProSil Wafer Corporation.

Should your agency have any concerns or questions about the startup and change of ownership, please contact me.

Sincerely,

Larry Mohr

Environmental Manager

(408) 988-2700

NOTIFICATION DATA CHANGE

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				DATE CI	IANGED:	91.11.07
FACILITY ID: (AT ON	р ф32 185	(•
ACTION AI	PPROVED	91-14-2	5	FACILITY	Y STATUS	
NAME OF INSTA	ILLATION: A	,	_)		
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INSTALLATION MAILING ADDR	> CITY:			TATE:	ZIP:	
INSTALLATION LOCATION	> STREET: (3419-3949			ZIP:	
INSTAL. CONTA OWNER NAME:	CT: KOZ 1	Agusa		TYPE OF C		188-2700
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				DATE	CHANGE	2: 4/27/92

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Please refer to the instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

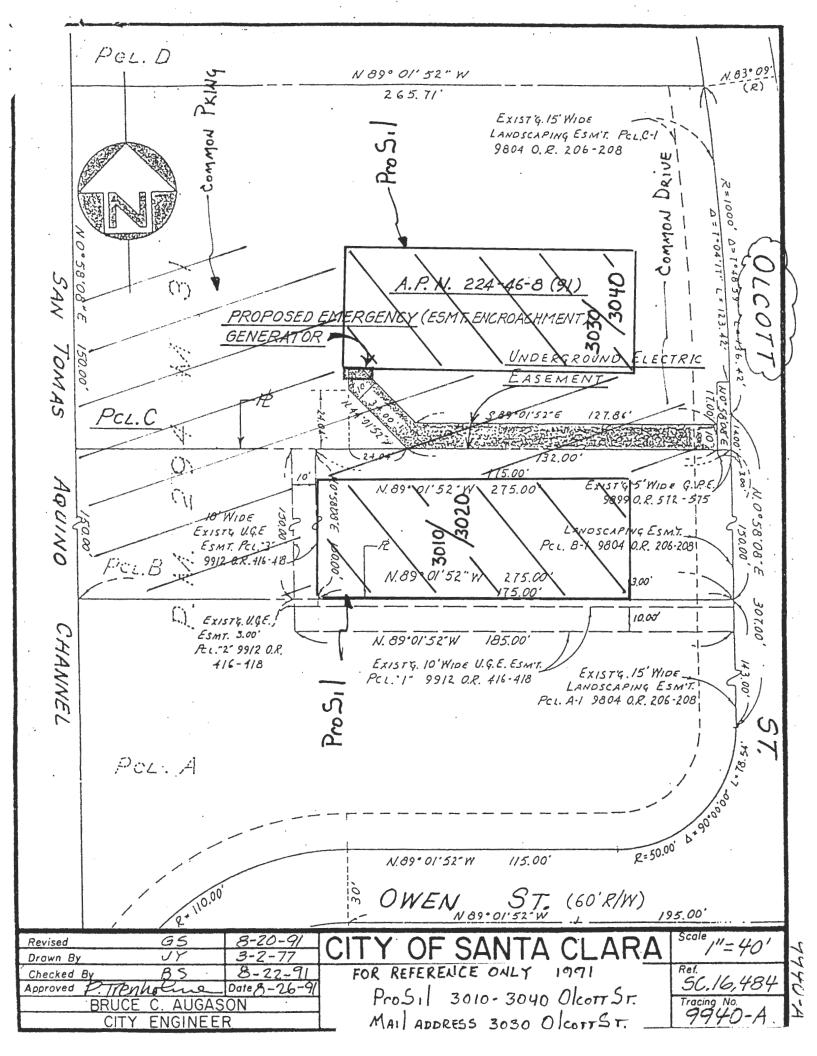


Notification of Regulated Waste Activity

Date Received (For Official Use Only)

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/III. Type of Regulated Wa	ste Activity (Mark 'X' in the appropriate boxes. Refer to	ASSESSED ASSESSED
	Hazardous Waste Activity	B. Used Oil Fuel Activities
1, Generato (See instruction a. Greater than 1000kg/r	Note: A permit is required for	Off-Specification Used Oil Fuel a. Generator Marketing to Burner
. b. 100 to 1000 kg/mg (2	20 - 2.200 lbs). 4 Hazardous Waste Fuel	b. Other Markerer
c. Lates that 100 kg/mo.	(220 lbs.)	c. Burner - Indicate device(s) Type of Combustion Device
2: Transporter (meloute Mod	6 in boxes 1-5 below) b. Other Marketers O Burner - Indicate device(s) -	1. Utility Boiler
by Entropinmental curbs	Type of Combustion Device	2. Industrial Boiler
Mode of Transportation 1. Air	1. Utility Boller	3. Industrial Furnace
2 Rait	3. Industrial Furnace	2. Specification Used Oil Fuel Market
3. Highway	5. Underground Injection Control	(or On-site Burner) Who First Claim the Oil Meets the Specification
5 Other specify		
X. Description of Regulate	d Wastes (Use additional sheets if necessary)	
 Characteristics of Nonliste wastes your installation han 	d Hazardous Wastes. Mark 'X' in the boxes corresponding to the dies. (See 40 CFR Parts 261.20 - 261.24)	e characteristics of nonlisted hazardous
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(D007) (15/002);		ous waste number(s) for the Toxicity
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Certification		
certify under penalty of	law that I have personally examined and am familiar w	vith the information submitted in th
nd all attached docum	ents, and that based on my inquiry of those indiv n, I believe that the submitted information is true, a	iduals immediately responsible to
	nt penalties for submitting false information, inc	
gnature	Name and Official Title (type or print)	Date Signed
(Min)	KAZ AGUSA, V. P. OPERATIONS	9-27-91
. Comments.		
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SEPA	NOTIFICATION OF HAZARDOUS WASTE ACTIVITY	INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the					
INSTALLA- TION'S EPA I.D. NO,		information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is					
I. STALLATION		complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted					
INSTALLA- TION II. MAILING ADDRESS	PLEASE PLACE LABEL IN THIS SPACE	label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer					
LOCATION IIL OF INSTAL- LATION		to the INSTRUCTIONS FOR FILING NOTIFI- CATION before completing this form, The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).					
FOR OFFICIAL U		第三年 而可用的特别的制度和发展较低					
	COMMENTS						
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I. NAME OF INS							
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II. INSTALLATIO	ON MAILING ADDRESS STREET OR P.O. BOX	Last Samuel Control Section 1					
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15 16	CITY OR TOWN ST. ZIP	45 CODE					
4 Santa	Clara, Calif. CA 95	0 51					
15 16	OF INSTALLATION	- 31					
III. LOCATION C	STREET OR ROUTE NUMBER						
5 30 10	O lcott St.						
15 16	CITY OR TOWN ST. ZIP	CODE					
6 Santa	Clara, Calif CA9 5	0 51					
IV. INSTALLATI	ON CONTACT NAME AND TITLE (last, first, & job title)	PHONE NO. (area code & no.)					
2 DOLL,	DAVID TOOLING ENGINEER	408 7 2 7 7 3 64					
V. OWNERSHIP	A. NAME OF INSTALLATION'S LEGAL OWNER						
8 ANTHONY	P. MEIER	55					
B. TYPE OF C							
F = FEDERAL M = NON-FED	M 57	RANSPORTATION (complete item VII) JNDERGROUND INJECTION					
VII. MODE OF T	RANSPORTATION (transporters only – enter "X" in the appropriate b	pox(es))					
A. AIR	B. RAIL C. HIGHWAY D. WATER GE. OTHER	(specify):					
	UBSEQUENT NOTIFICATION						
Mark "X" in the app If this is not your fire	ropriate box to indicate whether this is your installation's first notification of haz st notification, enter your Installation's EPA I.D. Number in the space provided be	ardous waste activity or a subsequent notification. elow.					
		C. INSTALLATION'S EPA I.D. NO.					
XXA. FIRST	NOTIFICATION B. SUBSEQUENT NOTIFICATION (complete item	1 C)					
	N OF HAZARDOUS WASTES						
riease go to the revei	rse of this form and provide the requested information.						

A. HAZARDOUS WASTES F waste from non—specific s	ROM NON-SPECIFIC	SOURCES. Enter the	four-digit number from	40 CFR Part 261.31 for	r each listed hazardous	
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E. CHARACTERISTICS OF				sponding to the characte	eristics of non—listed	,
hazardous wastes your inst	anation nancies. (See	40 CFH Parts 201.21 -	201,24.)			DHD.
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X. CERTIFICATION						
I certify under penalty attached documents, and I believe that the submi- mitting false information	d that based on my tted information is	inquiry of those inc true, accurate, and o	lividuals immediately complete. I am aware	responsible for obta	ining the information	n, n
SIGNATURE		A NAME & SE	CICIAL TITLE (tune or	nrintl	DATE SIGNED	
David A.	wolf	TOOLIN	G ENGINEER	DAVID R. DOL		
EPA Form 8700-12 (6-80)	EVERSE					

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ESPONDENT CONTACT RECORD (RC	R)			
FACILITY ID NUMBER	COMPANY MAN		The second secon	
	III Sie	racin/E.	O.Z.	
COMPANY ADDRESS		CITY	STATE ABBREV.	ZIP CODE
3010 O/cott	54.	Sonta Claro	CA	95051
CONTACT PERSON'S NAME/TITLE		1	TELEPHONE NUMBER (INCI	LUDE AREA CODE)
David Doll -to	oling Eng.		408 72	7-7364
	CONT	ACT RECORD		
DATE CONTRACTOR'S ITEMS DI	SCUSSED/RESOLUTION			
4/2 1/B Hwy.	Line Busy	/		
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DEPARTMENT OF HEALTH SERVICES
TOXIC SUBSTANCES CONTROL PROGRAM
2151 BERKELEY WAY, ANNEX 9
BERKELEY, CA 94704
(415) 540-3729 (A+08°032 | 88 (D)



October 24, 1990

CERTIFIED MAIL

Mr. Roger E. Bensenhaver Environmental Engineer Kawasaki Wafer Technology, Inc. 3010 Olcott Street Santa Clara, CA 95054

Dear Mr. Bensenhaver:

RETURN TO COMPLIANCE

Your response, dated September 12, 1990, to our Report of Violation (ROV) issued to NBK Corporation (now Kawasaki Wafer Technology Inc.), 3010 Olcott Street, Santa Clara, California, dated September 7, 1990, was received by us on September 17, 1990.

Based on our review of that response, the Department has determined that Kawasaki Wafer Technology Inc. (formerly NBK Corporation), 3010 Olcott Street, Santa Clara, California, has completed the required correction as outlined in the ROV.

Thank you for your efforts to achieve compliance. If you have any questions regarding this letter, please call Bill Brown at (415) 540-3889.

Sincerely,

William L. Brown

Hazardous Materials Specialist

1+06: In Brown

Region 2

Toxic Substances Control Program

Charlene 7. Williams

Charlene F. Williams

Branch Chief

Surveillance and Enforcement

Branch

Region 2

Toxic Substances Control Program

Mr. Roger E. Bensenhaver Page 2 October 24, 1990

Cert. Mail No. P-106 353 161

CC: Ms. Lily Wong
U.S. EPA, Region IX
1235 Mission Street
San Francisco, CA 94103

Mr. William Soo Hoo Toxics Legal Office Toxic Substances Control Program 714/744 P Street P.O. Box 942732 Sacramento, CA 94234-7320

Mr. Larry Matz Surveillance and Enforcement Toxic Substances Control Program 714/744 P Street P.O. Box 942732 Sacramento, CA 94234-7320

Ms. Rubia Bertram
Financial Responsibility Unit
Toxic Substances Control Program
714/744 P Street
P.O. Box 942732
Sacramento, CA 94234-7320

Ms. Robin Wakshull District Attorney's Office Santa Clara County 70 West Hedding Street San Jose, CA 95110